

SERFF Tracking Number: CMPX-125369831 State: Arkansas
 Filing Company: Companion Property & Casualty Insurance State Tracking Number: #? \$?
 Company
 Company Tracking Number: P#06191
 TOI: 17.0 Other Liability - Claims Made/Occurrence Sub-TOI: 17.0001 Commercial General Liability
 Product Name: General Liability
 Project Name/Number: MU GL 2007 Rules & Forms Revision 12/1/07/P#06191

Filing at a Glance

Company: Companion Property & Casualty Insurance Company
 Product Name: General Liability SERFF Tr Num: CMPX-125369831 State: Arkansas
 TOI: 17.0 Other Liability - Claims SERFF Status: Closed State Tr Num: #? \$?
 Made/Occurrence
 Sub-TOI: 17.0001 Commercial General Liability Co Tr Num: P#06191 State Status: Fees verified and received
 Filing Type: Rule Co Status: Reviewer(s): Betty Montesi, Edith Roberts, Brittany Yielding
 Author: SPI CompanionPCGroup Disposition Date: 12/07/2007
 Date Submitted: 11/27/2007 Disposition Status: Non-Adoption
 Effective Date Requested (New): 12/01/2007 Effective Date (New):
 Effective Date Requested (Renewal): Effective Date (Renewal):
 State Filing Description:

General Information

Project Name: MU GL 2007 Rules & Forms Revision 12/1/07 Status of Filing in Domicile:
 Project Number: P#06191 Domicile Status Comments:
 Reference Organization: ISO Reference Number: GL-2006-OCTRU
 Reference Title: Advisory Org. Circular:
 Filing Status Changed: 12/07/2007
 State Status Changed: 12/07/2007 Deemer Date:
 Corresponding Filing Tracking Number:
 Filing Description:
 Companion Property & Casualty Insurance Company wishes to non-adopt the following ISO filing references indefinitely:
 GL-2006-OCTRU
 GL-2006-RCTLC

SERFF Tracking Number: CMPX-125369831 State: Arkansas

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Product Name: General Liability

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Company and Contact

Filing Contact Information

LaTonya Ivey, Regulatory Compliance Analyst latonya.ivey@companiongroup.com

II

P.O. Box 100165 (803) 795-7770 [Phone]

Columbia, SC 29202 (803) 865-3155[FAX]

Filing Company Information

Companion Property & Casualty Insurance CoCode: 12157 State of Domicile: South Carolina

Company

P.O. Box 100165 Group Code: 661

Columbia, SC 29202 Group Name:

(800) 845-2724 ext. [Phone] FEIN Number: 57-0768836

Filing Fees

Fee Required? No

Retaliatory? No

Fee Explanation:

Per Company: No

SERFF Tracking Number: CMPX-125369831 State: Arkansas

Filing Company: Companion Property & Casualty Insurance State Tracking Number: #? \$?

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Non-Adoption Edith Roberts		12/07/2007	12/07/2007

Filing Notes

Subject	Note Type	Created By	Created On	Date Submitted
Filing fees	Note To Reviewer	SPI CompanionPCGr oup	12/07/2007	12/07/2007

SERFF Tracking Number:	CMPX-125369831	State:	Arkansas
Filing Company:	Companion Property & Casualty Insurance Company	State Tracking Number:	#? \$?
Company Tracking Number:	P#06191		
TOI:	17.0 Other Liability - Claims Made/Occurrence	Sub-TOI:	17.0001 Commercial General Liability
Product Name:	General Liability		
Project Name/Number:	MU GL 2007 Rules & Forms Revision 12/1/07/P#06191		

Disposition

Disposition Date: 12/07/2007

Effective Date (New):

Effective Date (Renewal):

Status: Non-Adoption

Comment:

Company Name:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Premium:	Maximum % Change (where required):	Minimum % Change (where required):	Overall % Indicated Change:
Companion Property & Casualty Insurance Company	%	\$		\$	%	%	%

SERFF Tracking Number: CMPX-125369831 State: Arkansas

Filing Company: Companion Property & Casualty Insurance State Tracking Number: #? \$?

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Company Tracking Number: P#06191

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Product Name: General Liability

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Cover Letter	Non-adoption	Yes
Supporting Document	AR - NAIC P&C TRANSMITTAL DOCUMENT	Non-adoption	Yes

SERFF Tracking Number:	CMPX-125369831	State:	Arkansas
Filing Company:	Companion Property & Casualty Insurance Company	State Tracking Number:	## \$?
Company Tracking Number:	P#06191		
TOI:	17.0 Other Liability - Claims Made/Occurrence	Sub-TOI:	17.0001 Commercial General Liability
Product Name:	General Liability		
Project Name/Number:	MU GL 2007 Rules & Forms Revision 12/1/07/P#06191		

Note To Reviewer

Created By:

SPI CompanionPCGroup on 12/07/2007 09:17 AM

Subject:

Filing fees

Comments:

Filing fee has been submitted through EFT.

SERFF Tracking Number:	CMPX-125369831	State:	Arkansas
Filing Company:	Companion Property & Casualty Insurance Company	State Tracking Number:	#? \$?
Company Tracking Number:	P#06191		
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Product Name:	General Liability		
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Rate Information

Rate data applies to filing.

Filing Method:

Rate Change Type:

Overall Percentage of Last Rate Revision:

Effective Date of Last Rate Revision:

Filing Method of Last Filing:

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Premium:	Maximum % Change (where required):	Minimum % Change (where required):
Companion Property & Casualty Insurance Company	%	%				%	%

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Company
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Product Name: General Liability
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Supporting Document Schedules

Satisfied -Name:	Cover Letter	Review Status:	
Comments:		Non-adoption	12/07/2007
Attachment:			
Cover Letter.PDF			
Satisfied -Name:	AR - NAIC P&C TRANSMITTAL DOCUMENT	Review Status:	
Comments:		Non-adoption	12/07/2007
Attachment:			
AR - NAIC P&C TRANSMITTAL DOCUMENT.PDF			



Companion Property & Casualty Group

Companion Property & Casualty
Insurance Company

Companion Commercial
Insurance Company

November 27, 2007

Commissioner Julie Benafield Bowman
Arkansas Department of Insurance
1200 West Third Street
Little Rock, AR 72201-1904

Attn: Property & Casualty Division

RE: Companion Property & Casualty Insurance Company NAIC#: 661-12157 FEIN#: 57-0768836
General Liability - MU GL 2007 Rules & Forms Revision 12/1/07
Company Filing: P#06191
Proposed Effective Date: Non-Adopt Indefinitely

Dear Commissioner Benafield Bowman:

Companion Property & Casualty Insurance Company wishes to non-adopt the following ISO filing references indefinitely:

GL-2006-OCTRU
GL-2006-RCTL

Please let me know if you need additional information.

Sincerely,

LaTonya Ivey
Regulatory Compliance Analyst II
Phone: 803-795-7770
Fax: 803 865-3155
Email: latonya.ivey@companiongroup.com

P.O. Box 100165 Columbia, South Carolina 29202-3165 (803) 735-0672 (800) 845-2724

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Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only	
	a. Date the filing is received:	
	b. Analyst:	
	c. Disposition:	
	d. Date of disposition of the filing:	
	e. Effective date of filing:	
	New Business	
	Renewal Business	
	f. State Filing #:	
g. SERFF Filing #:		
h. Subject Codes		

3. Group Name					Group NAIC #
					661
4. Company Name(s)	Domicile	NAIC #	FEIN #	State #	
Companion Property & Casualty Insurance Company	SC	12157	57-0768836		

5. Company Tracking Number	P#06191
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6. Name and address	Title	Telephone #s	FAX #	e-mail
LaTonya Ivey P.O. Box 100165 Columbia SC 29202	Regulatory Compliance Analyst II	800-845-2724	803 865-3155	latonya.ivey@companion group.com
7. Signature of authorized filer				
8. Please print name of authorized filer		LaTonya Ivey		

Filing Information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	17.0 Other Liability - Claims Made/Occurrence
10. Sub-Type of Insurance (Sub-TOI)	17.0001 Commercial General Liability
11. State Specific Product code(s) (if applicable) [See State Specific Requirements]	
12. Company Program Title (Marketing Title)	General Liability
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input checked="" type="checkbox"/> Rates/Rules <input type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: Renewal:
15. Reference Filing?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
16. Reference Organization (if applicable)	ISO
17. Reference Organization # & Title	GL-2006-OCTRU; GL-2006-RCTL
18. Company's Date of Filing	11/27/07
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document

20.	This filing transmittal is part of Company Tracking #	P#06191
21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]	

Companion Property & Casualty Insurance Company wishes to non-adopt the following ISO filing references indefinitely:

GL-2006-OCTRU

GL-2006-RCTLC

22.	Filing Fees (Filer must provide check # and fee amount if applicable.) [If a state requires you to show how you calculated your filing fees, place that calculation below]
	<div data-bbox="185 1461 295 1516"> Check #: Amount: </div> <div data-bbox="159 1757 1304 1812"> Refer to each state's checklist for additional state specific requirements or instructions on calculating fees. </div>

***Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)